Parcel:

05-38-16-01809-126

Owner & Property Info

WILLIARD LYSLE D & PATRICIA J

Owner

445 E KNIGHTSBRIDGE PL

LECANTØ, FL 344617926

Site

LOT 26 INDIAN RIDGE S/D PHS 2. WD 1177-2431,WD 1183-311, WD 1183-2713,WD 1185-1688,

WD 1188-1460

Area

5.15 AC

S/T/R

05-3S-16

Use Code**

VACANT (000000)

Tax District

3

^{*}The <u>Description</u> above is not to be used as the Legal Description for this parcel in any legal transaction.

**The <u>Use Code</u> is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific

Inst. Number: 202012018431 Book: 1423 Page: 561 Page 1 of 1 Date: 11/2/2020 Time: 10:06 AM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Deed: 262.50

Prepared by: Michael H. Harrell Abstract & Title Services, Inc. 111 East Howard Street Live Oak, Florida 32064

Inst: 202012018431 Date: 11/02/2020 Time: 10:06AM Page 1 of 1 B: 1423 P: 561, James M Swisher Jr, Clerk of Court Columbia. County, By: BR Deputy ClerkDuc Stamp-Deed: 262.50

ATS# 1-40777

Warranty Deed

Individual to Individual

THIS WARRANTY DEED made the <u>27th</u> day of October, 2020, By Lysle D. Williard, hereinafter called the grantor, to Walter Howard whose post office address is: 10660 SE CR 135, White Springs, Fl 32096 hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporation)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys, and confirms unto the grantee, all that certain land situate in COLUMBIA County, Florida viz: Parcel ID# 05-3S-16-01809-126

Lot 26, Indian Ridge, Phase Two, according to the Plat thereof, recorded in Plat Book 9, Page(s) 80 through 83, inclusive, of the Public Records of Columbia County, Florida.

The herein described property is vacant land and does not constitute the homestead property of the Grantor.

TOGETHER with all tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

TO HAVE AND TO HOLD, the same in fee simple forever.

AND the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2019.

IN WITNESS WHEREOF, the said grantor has signed and sealed these presents the day and year first above written.

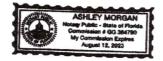
Signed, sealed and delivered in our presence:

Ally Mogy
WINESS
ASHLY Morgan
PRINTED NAME
WITNESS
PRINTED NAME
STATE OF FLORIDA
COUNTY OF LITTUS

The foregoing instrument was acknowledged before me this 27 day of October, 2020 by LYSLE D.

WILLIARD, who physically appeared before me, and who is personally known to me or, if not personally known to me, who produced for identification and who did not take an oath.

(Notary Seal)



July August 12.2023 Publit My Commission Expires 17511ey Morgan

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NU	MBER	CONTRACTOR Rusty Knowle	PHONE 386-397-0886
	THIS FORM MUST B	E SUBMITTED PRIOR TO THE ISSUANCE (OF A PERMIT
			Walter Howard
			site. It is <u>KEQUIKED</u> that we have permit. Per Florida Statute 440 and
Ordinance 89-	6, a contractor shall require all su	abcontractors to provide evidence	e of workers' compensation or
exemption, ge	neral liability insurance and a val	id Certificate of Competency licer	nse in Columbia County.
Any changes,	the permitted contractor is respo	onsible for the corrected form bei	ing submitted to this office prior to the
		k. Violations will result in stop we	
ELECTRICAL	Print Name Leo Jackson	Signature_	
	License #: ES 12001176	Name of the last o	386-294-2993
	Qua	alifier Form Attached X	
MECHANICAL/	Print Name Ronald Bonds	Sr. Signature	
A/C	License #:CAC_1817658	Phone #:	800-259-3470
		alifier Form Attached	
Qualifier Forr	ns cannot be submitted for an	v Snecialty License	
		y Specially License.	
Specialty L	icense License Number	Sub-Contractors Printed Name	Sub-Contractors Signature

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015

MASON

CONCRETE FINISHER



COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

	1. LONALO R Wond SE	(license holder name). licensed qualifier
	FOR STIPE CHEST ENTERDENSES	Jn L (company name), do certify that
	the below referenced person(s) listed on this for	m is/are contracted/hired by me, the license bugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 468, and the said d control and is/are authorized to purchase and
	Printed Name of Person Authorized	Signature of Authorized Person
	1. DALE BURD	1.
	2. Rocks Ford	2. (bela) 7-1
	3. Kally Bishap	3 Kelly Bishof
	4.	4.
	5.	5.
	I, the license holder, realize that I am responsible under my license and fully responsible for compl. Local Ordinances. I understand that the State ar authority to discipline a license holder for violation officers, or employees and that I have full responsand ordinances inherent in the privilege granted. If at any time the person(s) you have authorized officer(s), you must notify this department in writing authorization form, which will supersede all previous authorized persons to use your name and/or license.	liance with all Florida Statutes. Codes, and and County Licensing Boards have the power and ons committed by him/her, his/her agents, insibility for compliance with all statutes, codes by issuance of such permits. Is/are no longer agents, employee(s), or any of the changes and submit a new letter of ous lists. Failure to do so may allow cense number to obtain permits.
<	Licensed Qualifiers Signature (Notarized)	CAC 1817658 2-16-16 License Number Date
	NOTARY INFORMATION: STATE OF:COUNTY OF:	Bay
*	personally appeared before me and is known by	me or has produced identification his 14th day of FEB 20 (4).
	State V GAA ldupkins	(Seal/Stamp)
		«·····································





COLUMBIA COUNTY BUILDING DEPARTMENT 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

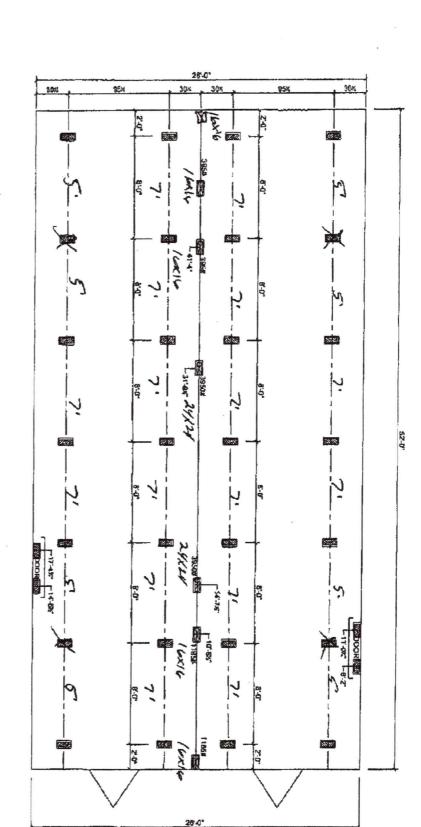
LICENSED QUALIFIER AUTHORIZATION

100 G FACKEON	(license holder name), licensed qualifier
or Country ELECTRIC	(company name), do certify that
the below referenced negative(a) listed on this for	m is/are contracted/hired by me, the license ugh an employee leasing arrangement; or, is an in Florida Statutes Chapter 488, and the said control and is/are authorized to purchase and
Printed Name of Person Authorized	Signature of Authorized Person
1. Onlis Burd	1 / 200
2. Roch Foxel	2. Roch D7
3. Leo JACKSON JR.	3. Judily
4.	4.
5.	5.
authority to discipline a license holder for violatic officers, or ampleyees and that I have full respondend ordinances inherent in the privilege granted officer(s), you must notify this december in write authorization form, which will supersede all preventionized persons to use your name and/or	neibility for compliance with all statutes, codes by issuance of such permits. Is/are no longer scents, employee(a), or ting of the changes and submit a new letter of tous lists. Fallure to do so may allow
Charle	ES DOD NO C 4/2G/16 License Number Diste
Corred Cifeifiers Signature (Notarized)	License Number Date
NOTARY INFORMATION COUNTY OF	
The above license holder, whose name is	50 G FACKER
Keen & Prishop	this de day of Port / 20/6.
NOTARY'S SIGNATURE 102 '92 our majding 'unimog fat 900502 at 9' unimog fat 900502 at 9' unimog fat 900503 is fatigat dOMEN is fatigat dOMEN is fatigat	(Seal/Stamp)
The state of the s	

Page 1 of 2			maniage within 7 of end of home pie kulle 15C			Installer's initials KCK w locations of Longitudinal and Lateral Systems (use dark lines to show these locations)	thou didev	City FL 33055	1638219	Mobile Home Permit Worksheet
¥2	TIEDOWN COMPONENTS TIEDOWN COMPONENTS OTHER TIES Number Nanufacturer Manufacturer Manufacturer	r pad size	Draw the approximate locations of marriage wall openings 4 toot or greater. Use this symbol to show the piers. List all marriage wall openings greater than 4 foot and their pier pad sizes below.	Perimeter pad size	100m Rule 15C-1 pler spacing table. PIER PAD SIZES PIER PAD SIZES POPULA	20" 22" x 22" 24" X 24" 26" 0) (484)" (576)" ((e/Quad Serial # 10/16 PIER SPACING TABLE FOR USI	Home is installed in accordance with Rule 15-C Single wide	Date:	

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Po	Connect all sewer drains to an existing sewer tap or septic tank. Pg. 1711	Plumbing	Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 152:1	Electrical		Date Tested 11-12-12	ESTS MUST BE PERFORME	Spilling Chancer	anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline ite points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 to holding capacity.	Note: A state approved lateral arm system is being used and 4 ft.	TORQUE PROBE TEST The results of the forque probe test is Making inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors.	×	reading and round down to that increment.	3. Using 500 lb. increments, take the lowest	 Test the perimeter of the home at 6 locations. Take the reading at the depth of the footer. 	POCKET PENETROMETER TESTING METHOD	×	The packet penetrometer tests are rounded down to or check here to declare 1000 lb. soil without testing.	POCKET PENETROMETER TEST	Mobile Home Permit Worksheet
Installer Signature Date 1/. 22.10	manufacturer's installation instructions and or Rule 15C-1 & 2	is accurate and true based on the	Installer verifies all information given with this permit worksheet		Other:	Range downflow vent installed outside of skirting. Yes N/A Drain lines supported at 4 foot intervals. Yes. Electrical crossments probability of the control of the contro		Miscellaneous	The bottomboard will be repaired and/or taped. Yes Pg.1721 Siding on units its installed to manufacturer's specifications. Yes Fireplace chimney installed so as not to allow influsion of rain water. Yes	Weathenprofing	Type gaskel LA clary Fush. Installer's initials A CK Pg. 15 C Between Floors Yes Between Walls Yes Bottom of adgebeam Yes	a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.	understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and hard-lad marriage well-	Gasket (weatherpresent professors)	For used homes a min. 30 gauge, 8" wide, galvanized metal sum will be centered over the peak of the roof and fastened with galv, roofing nails at 2" on center on both sides of the centerine.	Floor: Type Fastener: 144, Length: 4" Spacing: 14" Wells: Type Fastener: 144, Length: 4" Spacing: 14" Root: Type Fastener: 144, Length: 4" Spacing: 14"	Fastening multi wide units	Debris and organic material removed Water drainage: Natural Swale Pad Other	Site Preparation	Application Number:

700 g



3-BEDROOM MODEL: S-2523G -Live Oak Homes 23G - 28 X 52 / 2-BATH

- THIS DRAWING IS DESIGNED FOR THE STANDARD WIND ZONE AND IS TO BE USED IN CONJUNCTION WITH THE INSTALLATION MANUAL AND IT'S SUPPLEMENTS. POOTINGS ARE SHOWN FOR EXAMPLE ONLY QUANTITY AND SPACING MAY VARY BASED ON PAD TYPE, SOIL CONDITION, ETC. - FOOTINGS ARE REQUIRED AT SUPPORT POSTS, SEE INSTALLATION MANUAL FOR REQUIREMENTS.

FOUNDATION NOTES:

SUPPORT PIERTYP

STIMARRIAGE LINE OPENING SUPPORT PIERTYP.

- (A) MAIN ELECTRICAL
 (B) ELECTRICAL CROSSOVER
 (G) WATER CROSSOVER (F ANY)
 (E) CAS INCET (F ANY)
 (F) GAS CROSSOVER (IF ANY)
 - WATER CROSSOVER (IF ANY)
- BUCT CROSSOVER
 SEMER DROPS
 CO RETURN AIR (WOPT, HEAT PLIMP ON DUCT)
 SUPPLY AIR (WOPT, HEAT PLIMP ON DUCT)

S-2523G

STATE OF FLORIDA DEPARTMENT OF HEALTH

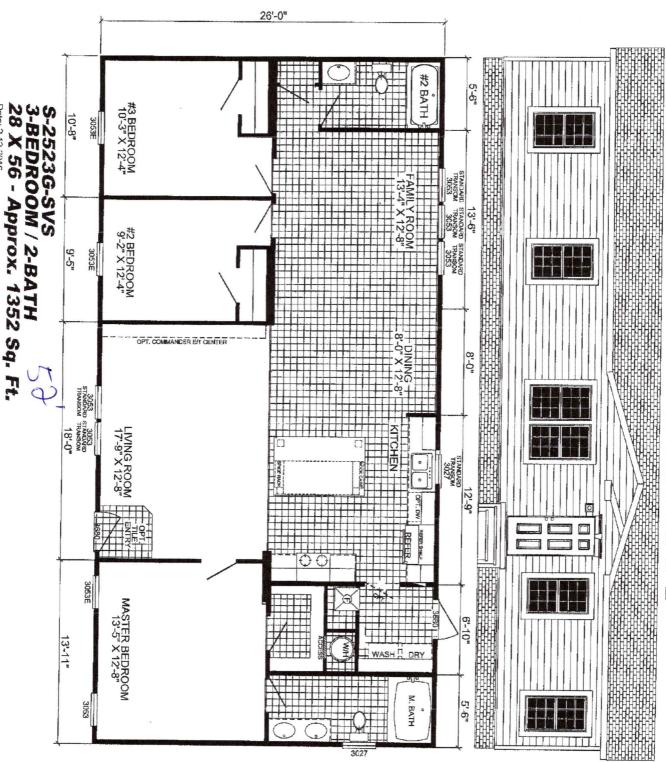
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

Howard		
Scale: 1 inch = 40 feet.		
210	WELL 102 28 1352 15 15 15 15 15 15 15 15 15 15 15 15 15	100' 100' 56
Notes:	- 5-15 ARRS , A	
	SER ATTACHE	
Site Plan submitted by:		CONTRACTOR
Plan Approved	Not Approved	Date
Ву		County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT





Date: 2-12-2016

All room dimensions include closets and square footage figures are approximate. Transom windows are available on optional 9'-0" sidewall houses only.